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OMB control number. PE Substitute for form 1449/PTO Complete if Known INFORMATION DISCLOSURE **Application Number** 10/791,711 DEC 0 8 2008 03/04/2004 STATEMENT BY APPLICANT Filing Date First Named Inventor Frank SAUER Date Submitted: December 8, 2008 Art Unit 3616 (use as many sheets as necessary) **Examiner Name** Faye M. Fleming PADEM

Attorney Docket Number

U.S. PATENT DOCUMENTS						
Examin er Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant	
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NON PATENT LITERATURE DOCUMENTS					
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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /F.F./

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Examiner Signature	/Faye Fleming/	Date Considered	12/21/2008

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